

RCE

09478372

## CLAIMS A

(Column 1)

(Column 2)

|   |           |              |
|---|-----------|--------------|
| TOTAL CLAIMS  |           |              |
| FOR   | DEPENDENT | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 20        |              |
| INDEPENDENT CLAIMS  | MINUS 3 = |              |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |           |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

after-final  
filed  
3-8-04

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

|             |   |                                  |       |                            |               |
|-------------|---|----------------------------------|-------|----------------------------|---------------|
| AMENDMENT A |   | CLAIMS REMAINING AFTER AMENDMENT |       | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | * 24                             | Minus | ** 24                      | = 2           |
|             | Independent   | * 4                              | Minus | *** 6                      | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                            |               |

(Column 1)

(Column 2)

(Column 3)

|             |   |                                  |       |                                    |               |
|-------------|---|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT B |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | *                                | Minus | **                                 | =             |
|             | Independent   | *                                | Minus | ***                                | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |               |

(Column 1)

(Column 2)

(Column 3)

|             |   |                                  |       |                                    |               |
|-------------|---|----------------------------------|-------|------------------------------------|---------------|
| AMENDMENT C |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | *                                | Minus | **                                 | =             |
|             | Independent   | *                                | Minus | ***                                | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |       |                                    |               |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

TYPE ☐OR SMALL ENTITY ☐

|           |        |    |           |        |
|-----------|--------|----|-----------|--------|
| RATE      | FEE    | OR | RATE      | FEE    |
| BASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
| XS 9=     |        | OR | XS18=     |        |
| X42=      |        | OR | X84=      |        |
| +140=     |        | OR | +280=     |        |
| TOTAL     |        | OR | TOTAL     |        |

OTHER THAN

ENTITY

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE | OR | RATE             | ADDITIONAL FEE |
| XS 9=            |                | OR | XS18=            |                |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE | OR | RATE             | ADDITIONAL FEE |
| XS 9=            |                | OR | XS18=            |                |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE | OR | RATE             | ADDITIONAL FEE |
| XS 9=            |                | OR | XS18=            |                |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

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